

## **2013 Annual Report – Beacon Health within the Lake County Jail**

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The focus of mental health service continues to be crisis intervention within the Lake County Jail, although the Mental Health Consultants (MHCs) in the jail also provide community linkage of consumers to mental health agencies upon release from jail, evaluation/assessment for appropriateness of participation in the Felony Intensive Case Management Program, court ordered mental health assessments that are required before release, and in some cases, intake and assessment of individuals while they are incarcerated in order to fully link them with services upon his/her release from jail. In addition to the above mentioned services, the MHCs' began facilitating a group within the community to a select number of individuals in September of this year. There was a slight change in staffing in 2013, while there remain 2 full time MHCs within the jail, there were three different psychiatric prescribers who alternated providing service throughout the year.

The mental health staff received a total of 1,906 referrals in 2013, which were 565 more referrals than in 2012. It is important to mention that many of the referrals received were on the same individuals and that just because mental health staff received 1,906 referrals that does not necessarily mean that there were 1,906 different people referred. Of the 1,906 referrals, fifty four percent of them were self referred, thirty-two percent were referred by correctional staff and medical staff in the jail, and the remaining fourteen percent of referrals came from other sources, i.e.-attorneys, family, courts, probation officers, community mental health agencies, police, and the Jail Treatment Program. In 2012 the same percentage were self referred with thirty-eight percent being referred by correctional/medical staff and eight percent referred from other sources.

Figure 1 illustrates the reasons for referral in 2013. As was the case in 2012, a majority of the referrals were to see a MHC, precisely fifty-seven percent. Thirty-four percent requested to see the psychiatrist, and six percent of the total referrals were for suicide risk. Four percent were referred for "other" reasons; this category includes but is not limited to court ordered mental health evaluations.

Dr. Ruth Martin, M.D., Dr. Praveen Abraham, D.O., and Sue Whittaker PMHNP-BC saw a total of 204 different people a total of 389 times, that is three less people and twenty-seven more visits than in 2012. The total number of non face to face consultations was nine, which is the same compared to 2012. A total of 101.1 hours was spent face to face with clients compared to 102.7 hours in 2012. There was psychiatric coverage for 48 out of 52 weeks, compared to 45 weeks in 2012. There were eleven individuals who were referred for emergency admission to a medical/mental health facility (pink slipped); one individual was referred twice, compared to seven individuals in 2012.

MHCs saw 332 (N=sample population) individuals a total of 684 times in 2013, although there were instances in which an individual may have been counted more than once if they returned to jail again throughout the year. This is forty two less individuals seen compared to 2012, however the number of visits increased by two.

Of the individuals seen by the MHCs, sixty four percent (N=322) had some type of contact with a mental health provider before coming to jail, and eighty-three percent

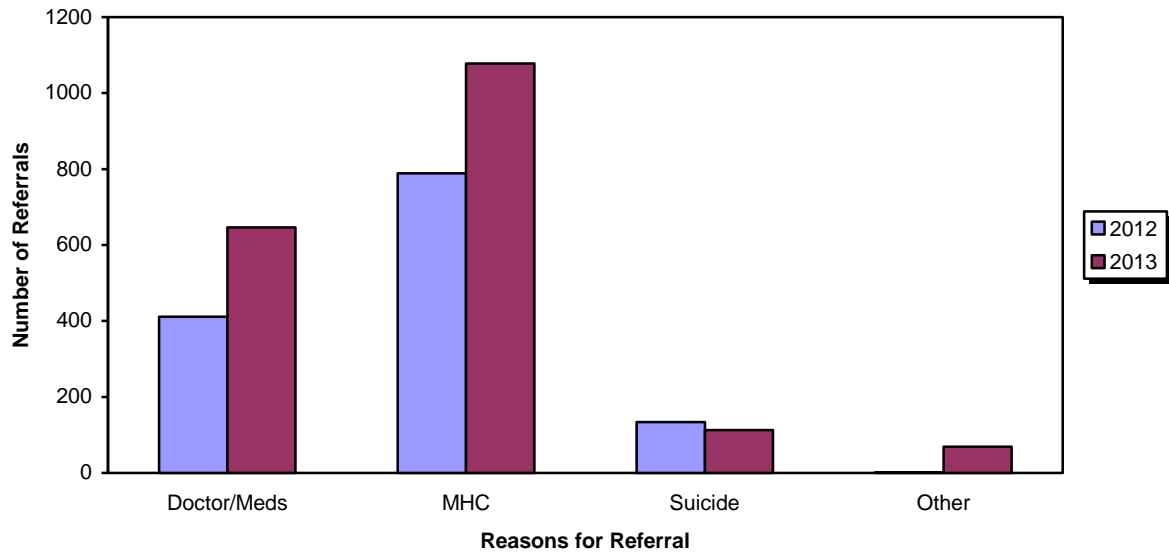
(N=325) were linked with an outpatient agency upon release from the jail. (NOTE: linkage may include anything from making an appointment and contacting a case manager to providing information on agencies in the community for the individual to follow up on their own upon release). Eighty-seven percent (N=283) had some type of housing before incarceration and eighty-seven percent (N=216) had housing upon release. (NOTE: housing may include residential treatment facilities, independent living, prison, etc.) Twelve percent (N=283) were homeless before coming to jail and twelve percent (N=216) were homeless upon release. Eighty-one percent (N=271) used or abused some type of substance before incarceration. Thirty-one percent (N=247) were employed before incarceration. Thirty four percent (N=214) of those reporting being prescribed medications at intake had also reported compliance with the medications before coming to jail. Eighty percent (N=278) of the individuals that were seen by the MHCs had a discharge plan completed before release (NOTE: this includes those who were pink slipped upon release from jail).

Figure 10 illustrates the type of diagnoses as well as the frequency that it was given. There were a total of 356 actual diagnoses given compared to 384 in 2012, with many individuals receiving more than one diagnosis. There were three individuals that received no diagnosis at all, compared to two in 2012. Mood Disorders continue to be the disorder most frequently diagnosed. The second most common diagnosis was in the category of substance abuse/dependency, which was also the case in 2012, accounting for twenty two percent of the diagnoses given. Psychotic Disorders were the third most used diagnosis in 2013, whereas in 2012 Personality Disorders were the third most used diagnosis. Psychotic Disorders constituted thirteen percent of the diagnoses given compared to eleven percent in 2012. There was also an increase in diagnoses of Anxiety Disorders and a decrease in the diagnoses of Personality Disorders given in 2013 compared to 2012.

Figure 11 illustrates that sixty three percent of those who requested mental health services were residents of Lake County, compared to sixty six percent of the sample in 2012 (See Figure 11). The percentage of individuals who were out of county residents increased by four percent while those receiving services who resided out of state decreased by two percent. Within Lake County, the majority of individuals receiving mental health services were residents of Painesville, followed by Mentor, and Willoughby (See Figure 12).

MHCs continue to focus on discharge planning into the year 2014. It remains challenging, but staff continues to explore ways to provide the best and most appropriate service to an ever growing population during difficult economic times.

**Figure 1. Reasons for Referral**



**Figure 2.**

<b>Pre-Jail MH Treatment</b>	
Pre-Jail MH Treatment	Total
No services	117
Irregular	140
Regular	61
Active Tx	4
N=sample population	322

**Figure 4.**

<b>Pre Jail Housing Status</b>	
Pre Jail Housing Status	Total
Independent Living	32
Living with other	196
Supervised Living	5
Treatment Facility	5
Homeless	35
Prison	10
N=sample population	283

**Figure 6.**

<b>Substance Use / Abuse</b>	
Substance Use / Abuse	Total
No substance use	51
Substance Use	72
Substance Abuse	148
N=sample population	271

**Figure 8.**

<b>Medication Compliance</b>	
Medication Compliant	Total
Non Compliant with Meds	141
Compliant with Meds	73
N=sample population	214

**Figure 3.**

<b>Post Jail Agency Linkages</b>	
Post Jail Agency Linkages	Total
Unknown	55
Beacon	137
Lake Geauga Center	5
Signature Health	26
Outside of County	52
Prison	20
Other	30
N=sample population	325

**Figure 5.**

<b>Post Jail Housing Status</b>	
Post Jail Housing Status	Total
Independent Living	14
Living with other	127
Supervised Living	6
Treatment Facility	20
Homeless	26
Prison	23
N=sample population	216

**Figure 7.**

<b>Pre-Jail Employment Status</b>	
Pre-Jail Employment Status	Total
Employed	77
Unemployed	170
N=sample population	247

**Figure 9.**

<b>Discharge Plan</b>	
Discharge Plan	Total
No Discharge Plan	55
Discharge Plan Made Pink	211
Slipped/Hospitalized	12
N=sample population	278

Figure 10. Diagnosis

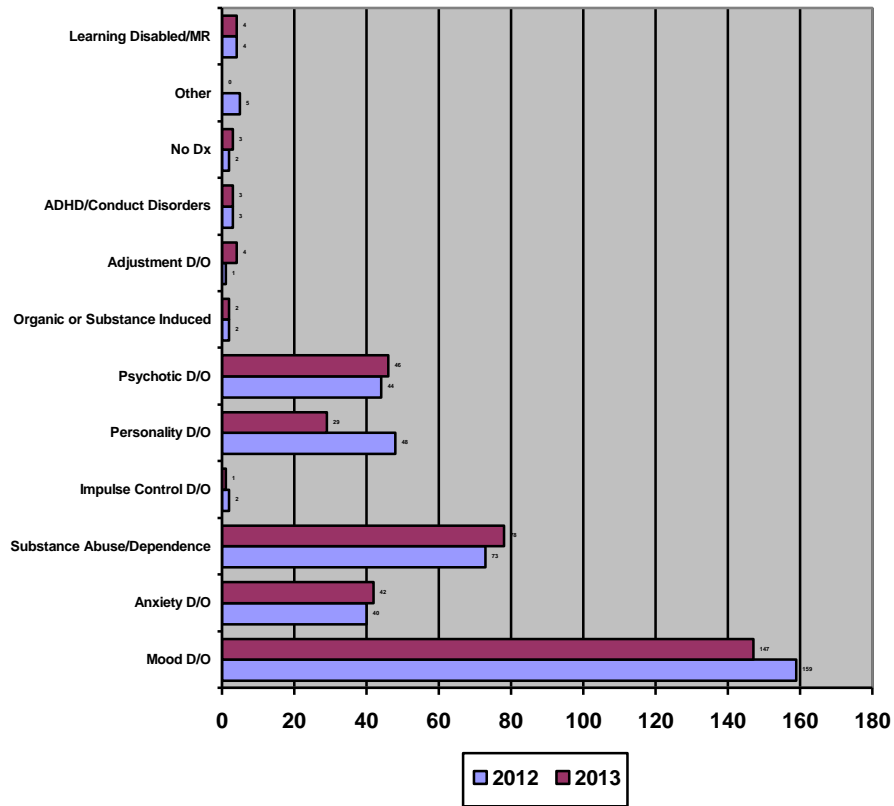


Figure 11. Mental Health Inmate by County

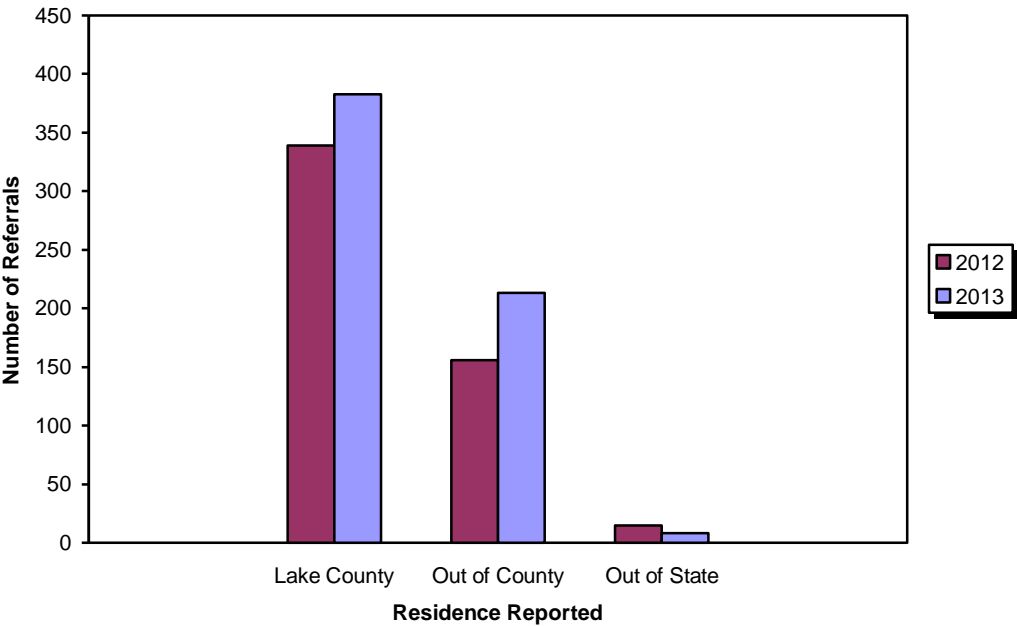


Figure 12. City of Origin in Lake County

